

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>FL</i>	<i>11</i>	<i>6-7-02</i>
O.I.P.E. CLASSIFIER	<i>NL</i>	<i>553</i>	<i>8/17/00</i>
FORMALITY REVIEW			<i>4/26/00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral) ... Canceled A Appeal
+ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	✓
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
8	✓	✓	✓
9	✓	✓	✓
10	N	N	N
11	N	N	N
12	N	N	N
13	N	N	N
14	N	N	N
15	N	N	N
16	N	N	N
17	N	N	N
18	N	N	N
19	N	N	N
20	N	N	N
21	✓	✓	✓
22	✓	✓	✓
23	✓	✓	✓
24	✓	✓	✓
25	✓	✓	✓
26	✓	✓	✓
27	✓	✓	✓
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29	✓	✓	✓
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If more than 150 claims or 10 actions
staple additional sheet here

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